

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Fedalei for Congress

ADDRESS (number and street)

P.O. Box 5904

Check if different
than previously
reported. (ACC)

Spartanburg

SC

29304

CITY ▲

STATE ▲

ZIP CODE ▲

2. **FEC IDENTIFICATION NUMBER ▼**

C

C00602581

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

STATE ▼ DISTRICT

SC

04

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the
State of(c) 30-Day **POST**-Election Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the
State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2016

through

M M / D D / Y Y Y Y

09 / 30 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Fedalei, Christopher, A.,

Type or Print Name of Treasurer

Signature of Treasurer

Fedalei, Christopher, A.,

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 15 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office
Use
Only**FEC FORM 3**
(Revised 05/2016)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 05/2016)

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Write or Type Committee Name
Fedalei for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	31399.00	78956.12
(b) Total Contribution Refunds (from Line 20(d))	0.00	510.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	31399.00	78446.12
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	28623.77	72252.25
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	28623.77	72252.25
8. Cash on Hand at Close of Reporting Period (from Line 27)	6193.87	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

For further information contact:

Federal Election Commission
 999 E Street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Fedalei for Congress

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	6

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

16108.00

48048.70

(ii) Unitemized.....

12791.00

24859.42

(iii) TOTAL of contributions from individuals ▶

28899.00

72908.12

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

2500.00

2940.00

(d) The Candidate.....

0.00

3108.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

31399.00

78956.12

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

0.00

0.00

15. OTHER RECEIPTS (Dividends, Interest, etc.)

0.00

0.00

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

31399.00

78956.12

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 05/2016)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	28623.77	72252.25
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	510.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	510.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	28623.77	72762.25

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3418.64
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	31399.00
25. SUBTOTAL (add Line 23 and Line 24).....	34817.64
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	28623.77
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6193.87

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Bergstrom, Peter, , ,

Mailing Address 105 Greenview Ct

City Simpsonville	State SC	Zip Code 29681-5301
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 20 2016

Transaction ID : VR0SXH743C5

Amount of Each Receipt this Period

50.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Bergstrom, Peter, , ,

Mailing Address 105 Greenview Ct

City Simpsonville	State SC	Zip Code 29681-5301
----------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2016
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 20 2016

Transaction ID : VR0SXHD5PV2

Amount of Each Receipt this Period

50.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Blackwell, Albert, , ,

Mailing Address 126 High Hat Cir

City Greenville	State SC	Zip Code 29617-7267
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 25 2016

Transaction ID : VR0SXHFG893

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

600.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Coltman, Kinneil, T, ,

Mailing Address 119 Pelham Springs Pl

City Greenville	State SC	Zip Code 29615-4978
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Greenville Hospital System	Occupation Chief Diversity Officer
--	---------------------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 13 / 2016

Transaction ID : VR0SXH65965

Amount of Each Receipt this Period

500.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Cordonier, Alan, E, ,

Mailing Address 108 Whittlin Way

City Taylors	State SC	Zip Code 29687-6443
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : VR0SXHFG8N8

Amount of Each Receipt this Period

300.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Crowe, Stanley, , ,

Mailing Address 11 Engel Dr

City Greenville	State SC	Zip Code 29617-7209
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : VR0SXHFG8Q3

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1100.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Fedalei for Congress**A.** Full Name (Last, First, Middle Initial)
Democratic Women of GreenvilleMailing Address 1300 E Washington St
Ste JCity
GreenvilleState
SCZip Code
29607-1858FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2016

Transaction ID : VR0SXH73PZ6

Amount of Each Receipt this Period

500.00

☐ Memo Item**B.** Full Name (Last, First, Middle Initial)
Democratic Women of GreenvilleMailing Address 1300 E Washington St
Ste JCity
GreenvilleState
SCZip Code
29607-1858FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

533.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		13		2016

Transaction ID : VR0SXHK3WT5

Amount of Each Receipt this Period

33.00

☐ Memo Item**C.** Full Name (Last, First, Middle Initial)
Dolge, Martha, , ,

Mailing Address 17 Mountain Brook Trl

City
GreenvilleState
SCZip Code
29609-6414FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

370.70

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		01		2016

Transaction ID : VR0SXHGEHH1

Amount of Each Receipt this Period

100.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

633.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Dosemagen, Eugene, , ,

Mailing Address 15 Patrol Club Rd

City Greenville	State SC	Zip Code 29609-6443
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 25 2016

Transaction ID : VR0SXHFG7C4

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Evans, Charles, V, ,

Mailing Address 1144 Trailhead Ct

City Greenville	State SC	Zip Code 29617-6222
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 20 2016

Transaction ID : VR0SXH73Q88

Amount of Each Receipt this Period

200.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Evans, Charles, V, ,

Mailing Address 1144 Trailhead Ct

City Greenville	State SC	Zip Code 29617-6222
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 20 2016

Transaction ID : VR0SXH73QA3

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

750.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial) Fedalei, Albert, G, ,			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 07 / 2016		
Mailing Address 25 Station Ct Apt 203			Transaction ID : VR0SXHWJ5J9		
City Greenville	State SC	Zip Code 29601-2955	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item			
Name of Employer GHS		Occupation Doctor			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 2960.00			
B. Full Name (Last, First, Middle Initial) Gilbert, John, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 22 / 2016		
Mailing Address 925 Cleveland St Unit 124			Transaction ID : VR0SXH82FD3		
City Greenville	State SC	Zip Code 29601-4530	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired music professor			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 100.00			
C. Full Name (Last, First, Middle Initial) Gilbert, John, , ,			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2016		
Mailing Address 925 Cleveland St Unit 124			Transaction ID : VR0SXHBj9K1		
City Greenville	State SC	Zip Code 29601-4530	Amount of Each Receipt this Period _____ 100.00		
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item			
Name of Employer Retired		Occupation Retired music professor			
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ _____ 200.00			
SUBTOTAL of Receipts This Page (optional)..... ▶			_____ 300.00		
TOTAL This Period (last page this line number only)..... ▶			_____		

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Gilbert, John, , ,

Mailing Address 925 Cleveland St
Unit 124

City Greenville State SC Zip Code 29601-4530

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired music professor

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 25 2016

Transaction ID : VR0SXHEAN18

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Gilbert, John, , ,

Mailing Address 925 Cleveland St
Unit 124

City Greenville State SC Zip Code 29601-4530

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired music professor

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 13 2016

Transaction ID : VR0SXHK2QG8

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Gilbert, John, , ,

Mailing Address 925 Cleveland St
Unit 124

City Greenville State SC Zip Code 29601-4530

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Retired music professor

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 27 2016

Transaction ID : VR0SXHPN270

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
GLASGOW, Margaret, , ,
Mailing Address 24 Lawson Way

City Greenville	State SC	Zip Code 29605-3232
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Retired	Occupation Sociologist
-----------------------------	---------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2016

Transaction ID : VR0SXHMPQH6

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Herwald, Kurt, , ,
Mailing Address 138 Sun Meadow Rd

City Greer	State SC	Zip Code 29650-3356
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Commercial Foodservice Repair	Occupation Commercial Foodservice Repair
---	---

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : VR0SXHFG733

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Hickerson, Ruth Anne, , ,
Mailing Address 255 Heathwood Dr

City Spartanburg	State SC	Zip Code 29307-3728
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Powers Solutions	Occupation President
--------------------------------------	-------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 295.70

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : VR0SXHBQD72

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 12 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
KING, DENISE, , ,

Mailing Address 6022 Woodsboro Dr

City Columbus	State OH	Zip Code 43228-9259
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer US Army	Occupation Disabled vet
-----------------------------	----------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
50.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 10 / 2016

Transaction ID : VR0SXH5D032

Amount of Each Receipt this Period

50.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
KING, DENISE, , ,

Mailing Address 6022 Woodsboro Dr

City Columbus	State OH	Zip Code 43228-9259
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer US Army	Occupation Disabled vet
-----------------------------	----------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
150.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 12 / 2016

Transaction ID : VR0SXH64J41

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
KING, DENISE, , ,

Mailing Address 6022 Woodsboro Dr

City Columbus	State OH	Zip Code 43228-9259
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer US Army	Occupation Disabled vet
-----------------------------	----------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : VR0SXHS4DK0

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

225.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 13 OF 37

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Liddle, Colleen, A, ,

Mailing Address 9 Pinegate Ct

City Columbia	State SC	Zip Code 29223-3245
------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 22 / 2016

Transaction ID : VR0SXHDCWW9

Amount of Each Receipt this Period

250.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Masters, Anne, , ,

Mailing Address 150 Foot Hills Rd

City Greenville	State SC	Zip Code 29617-7002
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Doctor
-----------------------------	----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : VR0SXHYZJF2

Amount of Each Receipt this Period

2700.00

☐ Memo Item

* In-Kind: Office Space

C. Full Name (Last, First, Middle Initial)
Mathieson, Tim, , ,

Mailing Address 11271 Ventura Blvd
505

City Studio City	State CA	Zip Code 91604-3136
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer TLM, INC.	Occupation Actor/Director
-------------------------------	------------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 08 / 2016

Transaction ID : VR0SXHB7717

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

3450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Matthieson, Tim, , ,

Mailing Address 11271 Ventura Blvd
505

City State Zip Code
Studio City CA 91604-3136

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TLM, INC. Actor/Director

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 24 2016

Transaction ID : VR0SXHE2EC7

Amount of Each Receipt this Period

50.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
McArthur, William D., , ,

Mailing Address 210 Valley Oak Dr

City State Zip Code
Greenville SC 29617-6160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
100.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 20 2016

Transaction ID : VR0SXH75Y61

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
McArthur, William D., , ,

Mailing Address 210 Valley Oak Dr

City State Zip Code
Greenville SC 29617-6160

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
Retired Retired

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 29 2016

Transaction ID : VR0SXHRVZC1

Amount of Each Receipt this Period

200.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Oconee County Democratic Party
Mailing Address PO Box 123

City State Zip Code
Seneca SC 29679-0123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 13 2016

Transaction ID : VR0SXHBQCW6

Amount of Each Receipt this Period

1000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Patterson, Dwight, , ,
Mailing Address PO Box 5564

City State Zip Code
Spartanburg SC 29304-5564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 01 2016

Transaction ID : VR0SXHHD109

Amount of Each Receipt this Period

750.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Poliakoff, Gary, , ,
Mailing Address 215 Magnolia St

City State Zip Code
Spartanburg SC 29306-2317

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Poliakoff and Assoicuates

Attorney

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 27 2016

Transaction ID : VR0SXH91919

Amount of Each Receipt this Period

250.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 16 OF 37

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Riehle, Christopher, , ,

Mailing Address 304 Saugus Rd

City Spartanburg	State SC	Zip Code 29307-3821
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Fedalei For Congress	Occupation Communications Director
--	---------------------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2016

Transaction ID : VR0SXHYZJ12

Amount of Each Receipt this Period

2700.00

☐ Memo Item

* In-Kind: Consulting Fee

B. Full Name (Last, First, Middle Initial)
RILEY, RICHARD, , ,

Mailing Address 46 Club Forest Ln

City Greenville	State SC	Zip Code 29605-3152
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer NELSON MULLINS LLP	Occupation ATTORNEY
--	------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 25 / 2016

Transaction ID : VR0SXHE9Q31

Amount of Each Receipt this Period

1000.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Roehrs, Shelly, , ,

Mailing Address 1211 Shadowood Dr

City Spartanburg	State SC	Zip Code 29301-5660
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 12 / 2016

Transaction ID : VR0SXHBQCZ9

Amount of Each Receipt this Period

500.00

☐ Memo Item**SUBTOTAL** of Receipts This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

4200.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial)
Smith, Nancy, , ,

Mailing Address 218 Butler Ave

City Greenville	State SC	Zip Code 29601-1913
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 120.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 25 2016

Transaction ID : VR0SXHFG7A8

Amount of Each Receipt this Period

100.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
Smith, Nancy, , ,

Mailing Address 218 Butler Ave

City Greenville	State SC	Zip Code 29601-1913
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer Unknown	Occupation Unknown
-----------------------------	-----------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 220.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 31 2016

Transaction ID : VR0SXHG5XW2

Amount of Each Receipt this Period

100.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)
Tawfique, Munir, , ,

Mailing Address 1270 W Peachtree St NW
Apt 19E

City Atlanta	State GA	Zip Code 30309-3413
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. C

Name of Employer PwC	Occupation Consultant
-------------------------	--------------------------

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 03 2016

Transaction ID : VR0SXH9ZFJ2

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 OF 37

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

A. Full Name (Last, First, Middle Initial) Theiler, Carol, , ,			Date of Receipt M M / D D / Y Y Y Y Y 09 18 2016	
Mailing Address PO Box 5369			Transaction ID : VR0SXHMG3C7	
City Spartanburg	State SC	Zip Code 29304-5369	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		Memo Item		
Name of Employer Retired		Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 890.00		

B. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		

C. Full Name (Last, First, Middle Initial)			Date of Receipt M M / D D / Y Y Y Y Y	
Mailing Address			Amount of Each Receipt this Period	
City	State	Zip Code	Memo Item	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date ▼		
Name of Employer		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....	500.00
TOTAL This Period (last page this line number only).....	16108.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 OF 37

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

A. Mailing Address 900 7th St NW

City Washington	State DC	Zip Code 20001-4089
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00027342

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 15 / 2016

Transaction ID : VR0SXH6B1D9

Amount of Each Receipt this Period

2000.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)
International Union of Painters and Allied Trades

Mailing Address 7234 Parkway Dr

City Hanover	State MD	Zip Code 21076-1307
-----------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** c00000885

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 13 / 2016

Transaction ID : VR0SXHK2QP5

Amount of Each Receipt this Period

500.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
☐ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

2500.00

2500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. American Airlines

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M M	D D	Y Y Y Y
08	01	2016

City
Fort WorthState
TXZip Code
76155-2605Purpose of Disbursement
Flight

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

76.60

Transaction ID : VQZTNA93HQ3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. American Airlines

Mailing Address 4333 Amon Carter Blvd

Date of Disbursement

M M	D D	Y Y Y Y
08	01	2016

City
Fort WorthState
TXZip Code
76155-2605Purpose of Disbursement
Flight

002

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

188.10

Transaction ID : VQZTNA93HR1

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Chambers, Philip, L, ,

Mailing Address 254 Heathwood Dr

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

City
SpartanburgState
SCZip Code
29307-3737Purpose of Disbursement
ReimbursementCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : VQZTNA8HZ41

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

464.70

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 21 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial) A. Chambers, Philip, L, ,				Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2016	
Mailing Address 254 Heathwood Dr					
City Spartanburg		State SC	Zip Code 29307-3737		
Purpose of Disbursement Reimbursement			<input type="text"/>		
Candidate Name			Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
FEC Identification Number C				Amount of Each Disbursement this Period 1250.00	
Transaction ID : VQZTNA8PR11				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) B. Crocker, Emily, R, ,				Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2016	
Mailing Address 660 Crocker Rd					
City Spartanburg		State SC	Zip Code 29307-4905		
Purpose of Disbursement Reimbursement for office supplies			<input type="text"/>		
Candidate Name			Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
FEC Identification Number C				Amount of Each Disbursement this Period 37.99	
Transaction ID : VQZTNA8RB77				<input type="checkbox"/> Memo Item	
Full Name (Last, First, Middle Initial) c. Delta Air Lines				Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016	
Mailing Address 1030 Delta Blvd					
City Atlanta		State GA	Zip Code 30354-1989		
Purpose of Disbursement Flight			<input type="text"/> 002		
Candidate Name			Category/ Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
FEC Identification Number C				Amount of Each Disbursement this Period 212.60	
Transaction ID : VQZTNA93HN7				<input type="checkbox"/> Memo Item	
SUBTOTAL of Disbursements This Page (optional).....				1500.59	
TOTAL This Period (last page this line number only).....					

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 22 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Delta Air Lines

Mailing Address 1030 Delta Blvd

City
AtlantaState
GAZip Code
30354-1989Purpose of Disbursement
Flight

002

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

212.60

Transaction ID : VQZTNA93HP5

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Emails

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	5		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

85.00

Transaction ID : VQZTNA8GYR0

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Emails

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

85.00

Transaction ID : VQZTNA96HF5

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

382.60

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 23 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Google Inc.

Mailing Address 1600 Amphitheatre Pkwy

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		06		2016

City
Mountain ViewState
CAZip Code
94043-1351Purpose of Disbursement
Online Services

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

74.49

Transaction ID : VQZTNA3DH0

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Internal Revenue Service

Mailing Address 440 Roper Mountain Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2016

City
GreenvilleState
SCZip Code
29615-4242Purpose of Disbursement
Taxes

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

917.72

Transaction ID : VQZTNA8WGG1

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

c. Internal Revenue Service

Mailing Address 440 Roper Mountain Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		15		2016

City
GreenvilleState
SCZip Code
29615-4242Purpose of Disbursement
Taxes

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

892.78

Transaction ID : VQZTNA983G9

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1884.99

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 24 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address 440 Roper Mountain Rd

Date of Disbursement

M M	D D	Y Y Y Y
09	15	2016

City
GreenvilleState
SCZip Code
29615-4242Purpose of Disbursement
Taxes

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1229.98

Transaction ID : VQZTNA9PR31

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1052.80

Transaction ID : VQZTNA8GYN6

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

c. Crocker, Emily, R, ,

Mailing Address 660 Crocker Rd

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

City
SpartanburgState
SCZip Code
29307-4905Purpose of Disbursement
Paycheck

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1052.80

Transaction ID : VQZTNA8GYP4

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

2282.78

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 25 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M	D D	Y Y Y Y
07	01	2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Processing Fee

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

38.16

Transaction ID : VQZTNA8GYQ2

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1977.47

Transaction ID : VQZTNA8RC05

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

c. Chambers, Philip, L, ,

Mailing Address 254 Heathwood Dr

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

City
SpartanburgState
SCZip Code
29307-3737Purpose of Disbursement
Paycheck

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

524.65

Transaction ID : VQZTNA8XTT0

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

2015.63

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 26 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Crocker, Emily, R, ,

Mailing Address 660 Crocker Rd

City
SpartanburgState
SCZip Code
29307-4905Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1052.81

Transaction ID : VQZTNA8RC12

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Proffitt, Peyton, , ,

Mailing Address 429 N Church St

City
SpartanburgState
SCZip Code
29303-3612Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	5		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

400.01

Transaction ID : VQZTNA8RC46

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Intuit Inc.

Mailing Address 2700 Coast Ave

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	1		2	0	1	6

FEC Identification Number

C

Amount of Each Disbursement this Period

1453.37

Transaction ID : VQZTNA91Z14

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

1453.37

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 27 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Crocker, Emily, R, ,

Mailing Address 660 Crocker Rd

City
SpartanburgState
SCZip Code
29307-4905Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

1052.80

Transaction ID : VQZTNA91Z22

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Proffitt, Peyton, , ,

Mailing Address 429 N Church St

City
SpartanburgState
SCZip Code
29303-3612Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

400.57

Transaction ID : VQZTNA91Z30

☒ Memo Item *

Full Name (Last, First, Middle Initial)

C. Intuit Inc.

Mailing Address 2700 Coast Ave

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll Expense

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

38.16

Transaction ID : VQZTNA93HH5

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

38.16

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 28 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M	D D	Y Y Y Y
08	19	2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1640.86

Transaction ID : VQZTNAA3CS1

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Chambers, Philip, L, ,

Mailing Address 254 Heathwood Dr

Date of Disbursement

M M	D D	Y Y Y Y
08	19	2016

City
SpartanburgState
SCZip Code
29307-3737Purpose of Disbursement
Paycheck

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

820.43

Transaction ID : VQZTNAA3CV7

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Proffitt, Peyton, , ,

Mailing Address 429 N Church St

Date of Disbursement

M M	D D	Y Y Y Y
08	19	2016

City
SpartanburgState
SCZip Code
29303-3612Purpose of Disbursement
Paycheck

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

820.43

Transaction ID : VQZTNAA3CT9

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1640.86

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M / D D / Y Y Y Y
08 / 31 / 2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

1459.85

Transaction ID : VQZTNAA3D14

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Chambers, Philip, L, ,

Mailing Address 254 Heathwood Dr

Date of Disbursement

M M / D D / Y Y Y Y
08 / 31 / 2016

City
SpartanburgState
SCZip Code
29307-3737Purpose of Disbursement
Paycheck

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

820.43

Transaction ID : VQZTNAA3D30

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Proffitt, Peyton, , ,

Mailing Address 429 N Church St

Date of Disbursement

M M / D D / Y Y Y Y
08 / 31 / 2016

City
SpartanburgState
SCZip Code
29303-3612Purpose of Disbursement
Paycheck

FEC Identification Number

C

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

639.42

Transaction ID : VQZTNAA3D48

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

1459.85

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 30 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1052.80

Transaction ID : VQZTNAA3CW5

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Crocker, Emily, R, ,

Mailing Address 660 Crocker Rd

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2016

City
SpartanburgState
SCZip Code
29307-4905Purpose of Disbursement
Pay Check

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

1052.80

Transaction ID : VQZTNAA3CX2

☒ Memo Item *

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C. Intuit Inc.

Mailing Address 2700 Coast Ave

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2016

City
Mountain ViewState
CAZip Code
94043-1140Purpose of Disbursement
Payroll

FEC Identification Number

C

Candidate Name

Amount of Each Disbursement this Period

3371.98

Transaction ID : VQZTNAA3D56

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

4424.78

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 31 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial) A. Chambers, Philip, L, ,				Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016	
Mailing Address 254 Heathwood Dr					
City Spartanburg		State SC	Zip Code 29307-3737		
Purpose of Disbursement Paycheck			<input type="text"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
FEC Identification Number C				Amount of Each Disbursement this Period 820.43	
Transaction ID : VQZTNAA3DT2				<input checked="" type="checkbox"/> Memo Item *	
Full Name (Last, First, Middle Initial) B. Crocker, Emily, R, ,				Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016	
Mailing Address 660 Crocker Rd					
City Spartanburg		State SC	Zip Code 29307-4905		
Purpose of Disbursement Paycheck			<input type="text"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
FEC Identification Number C				Amount of Each Disbursement this Period 1052.80	
Transaction ID : VQZTNAA3D64				<input checked="" type="checkbox"/> Memo Item *	
Full Name (Last, First, Middle Initial) C. Proffitt, Peyton, , ,				Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2016	
Mailing Address 429 N Church St					
City Spartanburg		State SC	Zip Code 29303-3612		
Purpose of Disbursement Paycheck			<input type="text"/>		
Candidate Name			Category/ Type		
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:				
FEC Identification Number C				Amount of Each Disbursement this Period 639.41	
Transaction ID : VQZTNAA3DS4				<input checked="" type="checkbox"/> Memo Item *	
SUBTOTAL of Disbursements This Page (optional).....▶				0.00	
TOTAL This Period (last page this line number only).....▶					

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 32 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Vetter, Caroline, , ,

Mailing Address 260 Lake Forest Dr

City
SpartanburgState
SCZip Code
29307-3753Purpose of Disbursement
Paycheck

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

859.34

Transaction ID : VQZTNA3D97

☒ Memo Item *

Full Name (Last, First, Middle Initial)

B. Masters, Anne, , ,

Mailing Address 150 Foot Hills Rd

City
GreenvilleState
SCZip Code
29617-7002Purpose of Disbursement
Office Space

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

2700.00

Transaction ID : VR0SXHYZJF2I

☐ Memo Item * In-Kind Received

Full Name (Last, First, Middle Initial)

C. NGP VANMailing Address 1101 15th St NW
Ste 500City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
Vendor Payment

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		10		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : VQZTNA96HH1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

3450.00

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 33 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. NGP VANMailing Address 1101 15th St NW
Ste 500City
WashingtonState
DCZip Code
20005-5006Purpose of Disbursement
NGP Monthly Payment

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

750.00

Transaction ID : VQZTNA3D06

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. Powers Solutions

Mailing Address PO Box 5108

City
SpartanburgState
SCZip Code
29304-5108Purpose of Disbursement
Literature Purchase

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		13		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

553.32

Transaction ID : VQZTNA8WGH8

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. Powers Solutions

Mailing Address PO Box 5108

City
SpartanburgState
SCZip Code
29304-5108Purpose of Disbursement
Printing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

837.40

Transaction ID : VQZTNA93HK1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2140.72

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 34 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial) A. Riehle, Christopher, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2016	
Mailing Address 304 Saugus Rd				
City Spartanburg	State SC	Zip Code 29307-3821	FEC Identification Number C	
Purpose of Disbursement Consulting Fee			Amount of Each Disbursement this Period 2700.00	
Candidate Name		Category/ Type	Transaction ID : VR0SXHYZJ12I	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item * In-Kind Received	
State:	District:			

Full Name (Last, First, Middle Initial) B. Sage Payment Solutions			Date of Disbursement M M / D D / Y Y Y Y 07 / 05 / 2016	
Mailing Address 12120 Sunset Hills Rd Ste 500				
City Reston	State VA	Zip Code 20190-5858	FEC Identification Number C	
Purpose of Disbursement Credit Card processing fee			Amount of Each Disbursement this Period 190.58	
Candidate Name		Category/ Type	Transaction ID : VQZTNA8HVD5	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	
State:	District:			

Full Name (Last, First, Middle Initial) c. Sage Payment Solutions			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2016	
Mailing Address 12120 Sunset Hills Rd Ste 500				
City Reston	State VA	Zip Code 20190-5858	FEC Identification Number C	
Purpose of Disbursement Credit Card Processing			Amount of Each Disbursement this Period 262.68	
Candidate Name		Category/ Type	Transaction ID : VQZTNA93HJ3	
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item	
State:	District:			

SUBTOTAL of Disbursements This Page (optional).....▶

3153.26

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 35 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. Sage Payment SolutionsMailing Address 12120 Sunset Hills Rd
Ste 500City
RestonState
VAZip Code
20190-5858Purpose of Disbursement
Credit Card Processing

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

127.02

Transaction ID : VQZTNA3DG3

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. South Carolina Democratic PartyMailing Address 915 Lady St
Ste 111City
ColumbiaState
SCZip Code
29201-3187Purpose of Disbursement
Software Purchase

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : VQZTNA8DZN3

☐ Memo Item

Full Name (Last, First, Middle Initial)

c. South Carolina Democratic PartyMailing Address 915 Lady St
Ste 111City
ColumbiaState
SCZip Code
29201-3187Purpose of Disbursement
Software Purchase

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		01		2016

FEC Identification Number

C

Amount of Each Disbursement this Period

200.00

Transaction ID : VQZTNA8DZP1

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

527.02

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 36 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. South Carolina Democratic PartyMailing Address 915 Lady St
Ste 111City
ColumbiaState
SCZip Code
29201-3187Purpose of Disbursement
Software Purchase

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
09	01	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

250.00

Transaction ID : VQZTNA8DZQ9

☐ Memo Item

Full Name (Last, First, Middle Initial)

B. South Carolina Department of Revenue

Mailing Address PO Box 125

City
ColumbiaState
SCZip Code
29202-0125Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
07	15	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

158.33

Transaction ID : VQZTNA8WGD7

☐ Memo Item

Full Name (Last, First, Middle Initial)

C. South Carolina Department of Revenue

Mailing Address PO Box 125

City
ColumbiaState
SCZip Code
29202-0125Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M	D D	Y Y Y Y
08	15	2016

FEC Identification Number

C

Amount of Each Disbursement this Period

157.17

Transaction ID : VQZTNA983H7

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

565.50

TOTAL This Period (last page this line number only).....▶

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 37 OF 37

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
Fedalei for Congress

Full Name (Last, First, Middle Initial)

A. South Carolina Department of Revenue

Mailing Address PO Box 125

Date of Disbursement

M M	D D	Y Y Y Y
09	15	2016

City
ColumbiaState
SCZip Code
29202-0125

FEC Identification Number

C

Purpose of Disbursement
Taxes

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

207.74

Transaction ID : VQZTNA9PRC2

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. United Airlines INC.

Mailing Address 233 S Wacker Dr

Date of Disbursement

M M	D D	Y Y Y Y
07	29	2016

City
ChicagoState
ILZip Code
60606-7147

FEC Identification Number

C

Purpose of Disbursement
Flight

Candidate Name

002
Category/
Type

Amount of Each Disbursement this Period

268.10

Transaction ID : VQZTNA93HM9

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☒ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Mailing Address

Date of Disbursement

M M	D D	Y Y Y Y

City

State

Zip Code

FEC Identification Number

C

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

☐ Memo Item

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional).....▶

475.84

TOTAL This Period (last page this line number only).....▶

27860.65